

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	12-5-00
FORMALITY REVIEW	CH	127916	1/2/01
RESPONSE FORMALITY REVIEW	LS	50906	07/20/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	12-5-00
2	12-5-00
3	12-5-00
4	12-5-00
5	12-5-00
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49	12-5-00
50	12-5-00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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